



(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323-E)

File Number: 0000047114 | Submit Date: 2018-03-02 | FRN: 0002527752

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 03/02/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0002527752		Missouri River Christian Broadcasting, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 187	WASHINGTON	MO	63090-0187	+1 (636) 239-0400	gn@yhti.net

2. Contact Representative

Name		Organization			
JAMES GOGGAN		MISSOURI RIVER CHRISTIAN BROADCASTING, INC.			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 5	WASHINGTON	MO	63090-0005	+1 (636) 230-0400	gn@yhti.net

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:

Relationship to stations/permits	Licensee	
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?	No	

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2017  When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
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Missouri River Christian Broadcasting, Inc.	0002527752
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Fac. ID No.	Call Sign	City	State	Service
2842	KGNA-FM	ARNOLD	MO	FM
43220	KGNV	WASHINGTON	MO	FM
43313	KGNN-FM	CUBA	MO	FM
66671	KGNX	BALLWIN	MO	FM
140026	K285FC	JEFFERSON CITY	MO	FX
141894	K264BZ	ROLLA	MO	FX
141910	K235AO	SALEM	MO	FX

## Section II – Biennial Ownership Information

### 1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select “Other.” Non-Licensee Respondents should select “Not Applicable” in response to this question.

Not Applicable.

### 2. Ownership Interests

**(a) Ownership Interests.** This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A “direct” interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission’s Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information		
FRN	0002527752	
Entity Name	Missouri River Christian Broadcasting, Inc.	
Address	PO Box	187
	Street 1	
	Street 2	
	City	WASHINGTON
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63090-0187

	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990132896	
Name	JAMES GOGGAN	
Address	PO Box	5
	Street 1	
	Street 2	
	City	WASHINGTON
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63090-0005
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	MANAGER	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	11.1%
	Total assets (Equity Debt Plus)	11.1%

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
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Ownership Information		
FRN	9990132917	
Name	ROGER JONES	
Address	PO Box	
	Street 1	5130 MID-AMERICAN LANE
	Street 2	
	City	WASHINGTON
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63090
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	BUS MANAGER	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	11.1%
	Total assets (Equity Debt Plus)	11.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990132925	
Name	MARILYN GOGGAN	
Address	PO Box	5
	Street 1	
	Street 2	
	City	WASHINGTON

	<b>State ("NA" if non-U.S. address)</b>	MO
	<b>Zip/Postal Code</b>	63090-0005
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	TEACHER	
<b>By Whom Appointed or Elected</b>	BOARD OF DIRECTORS	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Female
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	11.1%
	<b>Total assets (Equity Debt Plus)</b>	11.1%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
<b>FRN</b>	9990132934	
<b>Name</b>	MARY REDHAGE	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	254 MILLSTONE CT.
	<b>Street 2</b>	
	<b>City</b>	WASHINGTON
	<b>State ("NA" if non-U.S. address)</b>	MO
	<b>Zip/Postal Code</b>	63090
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	BOOKKEEPER	
<b>By Whom Appointed or Elected</b>	BOARD OF DIRECTORS	

<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Female
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	11.1%
	<b>Total assets (Equity Debt Plus)</b>	11.1%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
FRN	9990132941	
Name	KERRY MESSER	
Address	PO Box	1288
	Street 1	
	Street 2	
	City	FESTUS
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63028-1288
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	FAMILY ADVOCATE	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	11.1%
	<b>Total assets (Equity Debt Plus)</b>	11.1%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
FRN	9990132943	
Name	TIM NOE	
Address	PO Box	
	Street 1	19978 OAK RIDGE
	Street 2	
	City	WARRENTON
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63383
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	DEVELOPMENT MANAGER	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	11.1%
	Total assets (Equity Debt Plus)	11.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990132944	
Name	ROB ALLYN	
Address	PO Box	
	Street 1	1036 MITCHELL WAY
	Street 2	
	City	PACIFIC
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63069

	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	TECHNICIAN	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	11.1%
	Total assets (Equity Debt Plus)	11.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990132946	
Name	JUDITH PETERS	
Address	PO Box	
	Street 1	947 KINGSCOVE COURT
	Street 2	
	City	TOWN AND COUNTRY
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63017
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	FARMER	
By Whom Appointed or Elected	BOARD OF DIRECTORS	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female



	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	11.1%
	<b>Total assets (Equity Debt Plus)</b>	11.1%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

<b>Ownership Information</b>		
<b>FRN</b>	9990132947	
<b>Name</b>	KENT HILL	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	129 COUNTRY CLUB GROUNDS
	<b>Street 2</b>	
	<b>City</b>	WASHINGTON
	<b>State ("NA" if non-U.S. address)</b>	MO
	<b>Zip/Postal Code</b>	63090
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	RETIRED	
<b>By Whom Appointed or Elected</b>	BOARD OF DIRECTORS	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	11.1%
	<b>Total assets (Equity Debt Plus)</b>	11.1%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<p>(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</p> <p>If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.</p>	No
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3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select “N/A” in response to this question.

LICENSEE IS SOLE OWNER, BEING DIRECTED BY ITS BOARD OF DIRECTORS..

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSE --OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: <b>PRESIDENT</b> Exact Legal Title or Name of Respondent: <b>MISSOURI RIVER CHRISTIAN BROADCASTING, INC.</b> Name: <b>JAMES GOGGAN</b> Phone: <b>6362390400</b>  03/02/2018